# 2000 ANNUAL REPORT TABLE OF CONTENTS

#### Message From The Chairman

Background of the Rhode Island Long-Term-Care Coordinating Council

The 2000 Long-Term-Care Coordinating Council Membership

Section 1: 2001 Recommendations

#### Section 2: The 2000 Council Report

- I. Legislation
- II. Advocacy
- III. Public Information and Education
- IV. Planning, Research, Policy Development

#### Section 3: Work Plan 2000 Status Report

Appendix I. Highlights of Long-Term-Care Coordinating Council

Accomplishments: 1987 - 1999

Appendix II: Statute Establishing The Long-Term-Care Coordinating Council.

Appendix III. State Long-Term-Care Plan Principles and Goals

January, 2001

#### A Message From Lieutenant Governor Charles J. Fogarty, Chairman

This was the Council's 13th year of working to improve long-term-care services and my fourth year serving as Council Chairman. Of special impact this past year was the Council's successful work to expand the state pharmaceutical assistance program for the elderly (RIPAE) and to increase Medicaid income eligibility for elders and persons with disabilities to 100 percent of the federal

poverty level (FLP).

In 2000, the Council continued to call attention to the ongoing harmful effects of the federal Balanced Budget Act of 1997 (BBA) on our state's health care system. Additional relief was achieved when Congress passed further refinements to BBA at the end of the year. However, it only delayed for one year and did not eliminate the 15% reduction for home care providers. In 2001 we must continue to urge Congress to abandon the 15 percent reduction and to address other negative aspects of BBA.

Recognizing the deepening crisis faced by nursing homes in recruiting and retaining certified nursing assistants (CNAs), in October I created a Council Study Group to address this critical issue and in November I called on Governor Almond to provide supplementary funds to provide a wage/compensation pass through for nursing home direct care workers.

As we begin a new year of advocacy for those who need long-term-care services, I am pleased to present the Council's recommended actions for 2001 as required by the Council's enabling statute. The recommendations are based on our ongoing work to implement the Council's **Long-Term Plan for Rhode Island**: Working Together to Make the Pieces Fit published in 1994. (See Section 1 for a list of the recommendations.)

My sincere thanks and appreciation to all members of the Council for their commitment and advocacy for those in need. I look forward to our continued work to build an affordable, accessible and consumer-friendly long-term care service system.

Sincerely,

Charles J. Fogarty

Lieutenant Governor

Chairman, Long-Term-Care Coordinating Council

# LONG TERM CARE COORDINATING COUNCIL

# BACKGROUND OF THE LONG TERM CARE COORDINATING COUNCIL

The RI Long Term Care Coordinating Council was established in 1987 by legislation proposed by former Lt. Gov. Richard A. Licht. Its purpose is to bring together leaders from the private and public sectors with the task of coordinating and setting the state's long-term care agenda. The thirty-seven member council includes elected officials, consumers, state agency directors, advocates, and providers of long-term care.

#### CHAIRPERSONS OF THE COUNCIL

1987-1988: Lieutenant Governor Richard A. Licht

1989-1992: State Representative Neil A. Corkery (of Warwick)

1993-1996: Lieutenant Governor Robert A. Weygand

1996-present: Lieutenant Governor Charles J. Fogarty

#### LONG TERM CARE COORDINATING COUNCIL

(Memberships as of December 31, 2000\*)

## **Ex-Officio Members**

Name	Representing
Carlo Gamba	Advisory Commission on Aging
Wayne Farrington	Department of Health
Corrine Calise Russo	Secretary of State
Bruce Todisco	Attorney General
A. Kathryn Power, Director	Director of Mental Health, Retardation and Hospitals
Christine Ferguson, Director	Department of Human Services
Barbara Rayner, Director Department of Elderly Affairs	
Roberta Hawkins Alliance for Better Nursing Home Care	
Charles J. Fogarty	Lieutenant Governor
Pamela Haskell	Senior Center Director's Association
Elizabeth Morancy	Exec. Director, Alzheimer's Association

# The Governor's Appointments

Name	Representing
Alfred Santos	Provider, other than nursing home owner
Robert Henry	Provider of Residential Care
Robert DiCenso	Public Member
Maria Barros, RN	Registered Nurse

#### The Lieutenant Governor's Appointments

Name	Representing
Sheila Cabral Sousa	Not-for-profit Nursing Home
Ed Zesk	General Public

Dr. Robert Westlake	Psychiatrist
Patrick Quinn	Non-managerial Nursing Home Employee
Bonnie Sekeres	Senior Housing
Neil Corkery, Vice Chairman	General Public

#### The Speaker's Appointments

Name	Representing
Anna Tucker	General Public
Rev. E. Naomi Craig, Sec.	General Public
Angelo Rotella	Nursing Home Owner
Mary Benway	For-profit Home Health Agency
Beverly McGuire	Non-profit Home Health Agency
Rick Ryan	Adult Day Care Center
Rep. Mark Heffner	Three State Representatives
Rep. Peter Ginaitt	

#### The Senate Majority Leader's Appointments

Sen. Elizabeth Roberts	Two State Senators
Sen. June Gibbs	
Anna Prior	General Public
Elizabeth Earls	Community Mental Health Association
Kayla Doherty	Home/Community Care Consumer: Mental Health
Dr. Herbert Constantine	Physician

• Council members serve until re-appointed or until a new member is appointed

# Section 1.

# **Recommendations for 2001**

# (These recommendations reflect the principles and goals of the State Plan for Long-Term Care as set forth in Appendix III and are based on WORK PLAN 2001 approved by the council on 1/3/01)

#### 1. Community-based Long-Term Care Entry System

Support Continued Development of Community-based Long-Term Care Entry System via

Elder-Disabled

Information/Referral/Assistance Network

-- Funding Needed - \$300,000

#### 2. Elder/Disabled Mental Health Services

Support funding to meet unmet mental health service needs of community living elders and disabled

-- Funding Needed - \$800,000

#### 3. CNA Recruitment and Retention Crisis

Support supplementary budget appropriation to provide "compensation pass-through" for nursing home direct care staff

-- Funding Needed: \$14 million (state share)

#### 4. Adequate Provider Compensation

Support legislation to require COLA's for long-term care providers

-- Funding Needed:

#### 5. Expand Affordable Assisted Living

Recommend further state funding to increase access to subsidized assisted living for low income persons via additional Medicaid waiver slots

-- Funding Needed: \$1,500,000 (for six months)

#### 6. Medicaid

- a. Study feasibility of offering selected Home and Community-based waiver services as state plan services
- **b.** Explore changes to Medicaid state plan regarding monthly maintenance needs of persons on community waiver as provided in new federal regulations

#### 7. Supportive Housing

Continue to promote development of "housing with services" model/s to allow persons to remain in home and community environments in collaboration with RI Housing Resources Commission

#### 8. Long-term-care Insurance

Continue to promote long term care insurance by: 1) supporting long –term care insurance tax credit legislation and 2) creating LTCCC Work Group on LTC Insurance

#### 9. Medicare

Continue to advocate for federal reform to increase Medicare funding for long term care services and to mitigate effects of Balanced Budget

#### Act of 1997

#### 10. Pharmaceutical Assistance

Continue to advocate for financial assistance to pay for prescription medications through expansion of RIPAE program

#### 11. Care Coordination

Support efforts to create new models of Long-term care coordination using best practices and using community-based agencies for care coordination and management. Collaborate efforts with Shared Vision "Living Right" Implementation Group

 a. Strengthen Community-based Case Management Network by addition of professional nurses

# -- Funding Needed - \$300,000

 b. Continue to work toward uniform assessment and case management process and placement protocols through LTCCC Work Group activity

#### 12. Long Term Care Information System

Support development of long-term care information system, which will serve as an interdepartmental data warehouse for state long-term care programs

#### 13. Quality Measurement and Reporting

Collaborate with DOH to implement 1998 Health Care Quality Measurement and Reporting Law as it relates to long term care facilities and services

#### 14. Workforce Issues

Continue work of Study Group to make recommendations regarding long-term solutions to problems relating to recruitment and retention of Certified Nurse Assistants

## Section 2.

### 2000 LONG TERM CARE COORDINATING COUNCIL REPORT

The Long Term Care Coordinating Council works in four major arenas to accomplish its mission: (1) the development and support of legislation; (2) advocacy; (3) public information and education; and (4) planning, research and policy development. During 2000 the full Council held eight meetings on the following dates.

January 27 June 7

February 29 October 4

April 5 November 8

May 3 December 6

Copies of all Council meetings are maintained in the office of the Lt. Governor. A summary of the Council's 2000 activities in each of the four major areas of its work follows. Recommendations for action in 2001 are contained in Section 2 in the Work Plan for 2001 (draft).

#### I. LEGISLATION

The following is a list of bills, with brief descriptions, introduced during the year 2000 legislature that were recommended or supported by the Long-Term-Care-Coordinating Council. To view the full text of the bill, click the bill number or public law number.

Rep. Peter Ginaitt Sen. June Gibbs Co-Chair, Legislation Committee

<u>\$2529</u>, AN ACT RELATING TO HUMAN SERVICES-- HEALTH CARE FOR ELDERLY AND DISABLED RESIDENTS -- Sponsored by: Senators Roberts, DaPonte, Coderre, Paiva Weed and Goodwin. *This act would provide health care coverage to elderly and disabled individuals whose income is less than 120% of the federal poverty level and whose resources are less than \$4,000. STATUS:Substitute A Passed -- Public Law 165* 

H7159, AN ACT RELATING TO HUMAN SERVICES-- HEALTH CARE FOR ELDERLY AND DISABLED RESIDENTS -- Sponsored by: Rep. Benoit, Henseler, Burlingame, Ginaitt and Dennigan. This act would provide health care coverage to elderly and disabled individuals whose income is less than 120% of the federal poverty level and whose resources are less than \$4,000.STATUS: Substitute A Passed -- Public Law 104

<u>S2603 SUB A</u>, AN ACT RELATING TO RESIDENTIAL CARE AND ASSISTED LIVING FACILITY LICENSING ACT (Assisted Living Licensing Changes -- Name Changes) -- Sponsored by: Senators Paiva- Weed, Goodwin, Connors and Gibbs. This act would change the name from residential care and assisted living facility to Assisted Living Residence, and expand the rights as to the information provided prior to or at the time of admission. STATUS: Substitute A Passed -- Public Law 163

H7465, AN ACT RELATING TO RESIDENTIAL CARE AND ASSISTED LIVING FACILITY LICENSING ACT -- Sponsored by: Reps. Ginaitt and Benoit. This act would change the name from residential care and assisted living facility to Assisted Living Residence, and expand the rights as to the information provided prior to or at the time of admission. STATUS: Substitute A Passed -- Public Law 448

<u>\$2571</u>, SENATE RESOLUTION-- RESPECTFULLY REQUESTING THE DEPARTMENT OF HUMAN SERVICES TO APPLY TO THE FEDERAL HEALTH CARE FINANCING ADMINISTRATION TO EXPAND ITS HOME AND COMMUNITY BASED WAIVER PROGRAMS -- Sponsored by: Senators Paiva-Weed, Roberts, Goodwin and Gibbs. *\$TATUS: Passed as Resolution #92* 

H7470, HOUSE RESOLUTION -- RESPECTFULLY DIRECTING THE DEPARTMENT OF HUMAN SERVICES TO APPLY TO THE FEDERAL HEALTH CARE FINANCING ADMINISTRATION TO EXPEND ITS HOME AND COMMUNITY BASED WAIVER PROGRAM(S) -- Sponsored by: Reps. Ginaitt and Benoit. STATUS: Passed as Resolution #121

<u>\$2573</u>, SENATE RESOLUTION -- RESPECTFULLY DIRECTING THE DEPARTMENT OF ELDERLY AFFAIRS TO IMPLEMENT A VOLUNTEER GUARDIANSHIP PROGRAM -- Sponsored by: Senators Gibbs, Roberts, J. Cicilline and Goodwin. *\$\$STATUS: Passed as Resolution #157* 

H 8014, HOUSE RESOLUTION -- RESPECTFULLY DIRECTING THE DEPARTMENT OF ELDERLY AFFAIRS TO IMPLEMENT A VOLUNTEER GUARDIANSHIP PROGRAM -- Sponsored by: Rep. Ginaitt. STATUS: Passed as Resolution #312

<u>\$2716</u>, SENATE RESOLUTION -- RESPECTFULLY DIRECTING ALL STATE DEPARTMENTS THAT FUND LONG-TERM CARE SERVICES TO PROVIDE APPROPRIATE COST OF LIVING ADJUSTMENT -- Sponsored by: Senators T. Coderre, Fogarty, DaPonte and Izzo. *STATUS: Failed to Pass* 

H7481, HOUSE RESOLUTION -- RESPECTFULLY DIRECTING ALL STATE DEPARTMENTS THAT FUND LONG-TERM CARE SERVICES TO PROVIDE APPROPRIATE COST OF LIVING ADJUSTMENT -- Sponsored by: Rep. Ginaitt and Benoit. STATUS: Failed to Pass

<u>\$2385</u>, AN ACT RELATING TO HOME HEALTH CARE PROVIDERS -- COST OF LIVING ADJUSTMENT -- Sponsored by: Senators Enos, Felag, Cicilline, Damiani, and Gibbs. *This act would provide a cost of living adjustment in compensation* 

for home health care providers. STATUS: Failed to Pass

- H7479, AN ACT RELATING TO HOME HEALTH CARE PROVIDERS -- COST OF LIVING ADJUSTMENT -- Sponsored by: Reps. Ginaitt and Benoit. This act would provide a cost of living adjustment in compensation for home health care providers. STATUS: Failed to Pass
- <u>S 2240</u>, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY ACT -- ELIGIBLE DRUGS -- Sponsored by: Senators Coderre, Roberts, Connors, Gibbs, and Fogarty. *This act expands the list of eligible drugs under the Pharmaceutical Assistance to the Elderly Program and creates a nine(9) member quality assurance advisory committee.* **STATUS: Failed to Pass**
- H 7483, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY ACT -- ELIGIBLE DRUGS -- Sponsored by: Reps. Reily, Jacquard, Coelho, Fergurson and Ginaitt. This act expands the list of eligible drugs under the Pharmaceutical Assistance to the Elderly Program and creates a nine (9) member quality assurance advisory committee. STATUS: Failed to Pass
- <u>S 2239</u>, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY ACT -- ELIGIBLE DRUGS -- Sponsored by: Senators Cicilline, Roberts, Connors, Gibbs and Fogarty. This act would include Rhode Island resident who are at least fifty-five (55) years of age and receive Social Security disability benefits as those eligible to receive benefits under the Pharmaceutical Assistance to the Elderly Program. STATUS: Failed to Pass
- H 7480, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY ACT -- ELIGIBLE DRUGS -- Sponsored by: Reps. Ginaitt, Corvese, Reily, Dennigan and Sherlock. This act would include Rhode Island resident who are at least fifty-five (55) years of age and receive Social Security disability benefits as those eligible to receive benefits under the Pharmaceutical Assistance to the Elderly Program. STATUS: Failed to Pass
- <u>S 2479</u>, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY -- Sponsored by: Senators Roberts, Izzo, Sosnowski and Fogarty. This act would require the state to pay 100% of the prescription drug cost for a consumer who has paid over five hundred dollars (\$500) in co-payments within a benefit year. STATUS: Failed to Pass
- H 7482, AN ACT RELATING TO THE PHARMACEUTICAL ASSISTANCE TO THE ELDERLY -- Sponsored by: Reps. Ginaitt, Benoit, Corvese, Reily and Dennigan. This act would require the state to pay 100% of the prescription drug cost for a consumer who has paid over five hundred dollars (\$500) in co-payments within a benefit year. STATUS: Failed to Pass
- <u>S 2540</u> as Amended, AN ACT RELATING TO THE HEALTH AND SAFETY -- LONG TERM CARE COORDINATING COUNCIL -- Sponsored by: Senators Roberts and Gibbs. *This act would add one member from the AARP to the Long-Term Care Coordinating Council.* **STATUS: Passed as Public Law #173**
- <u>H 7463</u>, AN ACT RELATING TO THE HEALTH AND SAFETY -- LONG TERM CARE COORDINATING COUNCIL -- Sponsored by: Rep. Ginaitt and Benoit. This act would replace one public member with the president of the Rhode Island Chapter of the American Association of Retired Persons (AARP) on the Long-Term Care Coordinating Council. **STATUS: Passed as Public Law #447**
- <u>S 2609</u>, AN ACT RELATING TO ELDERLY TRANSPORTATION -- Sponsored by: Senators Perry, Graziano, Goodwin, Igliozzi and Ruggerio. *This would require the elderly affairs department to create a demonstration program to provide transportation for people over 60 for visitation purposes. <i>STATUS: Failed to Pass*
- S 2615, AN ACT RELATING TO THE HEALTH AND SAFETY -- HEALTH CARE ACCESSIBILITY AND QUALITY ASSURANCE ACT -- Sponsored by: Senators Igliozzi and Gibbs. This act would add to the requirement for certification of health plans reporting regarding the cost of home health care and home nursing care. STATUS: Failed to Pass
- <u>S 2839</u>, AN ACT RELATNG TO TAXATION -- PERSONAL INCOME TAX -- Sponsored by: Senator Cote, Roberts and Gibbs. *This act would provide for a long-term care insurance tax credit.* **STATUS: Failed to Pass**
- S2863, An Act RELATING TO PHARMACEUTICAL ASSISTANCE TO THE ELDERLY --Sponsored by: Senators Kelly, Algiere, Fogarty P, Paiva-Weed, Perry. This act would establish a formula, based upon income, to determine the percentage of state and consumer co-payments for prescription drugs under the pharmaceutical assistance to the elderly act. STATUS: S2863 Substitute A Passed Public Law 195
- H8116, An Act RELATING TO PHARMACEUTICAL ASSISTANCE TO THE ELDERLY --Sponsored by: Reps. Martineau, Ginaitt, Benoit, Costantino, Moura. This act would establish a formula, based upon income, to determine the percentage of state and consumer co-payments for prescription drugs under the pharmaceutical assistance to the elderly act. STATUS: Provisions incorporated into Public Law 253
- \$2857, Senate Resolution REQUESTING THE 106TH CONGRESS OF THE UNITED STATES OF AMERICA TO PASS

LEGISLATION TO ADD A PRESCRIPTION DRUG BENEFIT TO THE MEDICARE PROGRAM -- Sponsored by: Senator Roberts. **STATUS: Passed – Resolution #178** 

<u>H8264</u>, House Resolution REQUESTING THE 106TH CONGRESS OF THE UNITED STATES OF AMERICA TO PASS LEGISLATION TO ADD A **PRESCRIPTION DRUG BENEFIT TO THE MEDICARE PROGRAM** -- Sponsored by: Reps. Ginaitt, Reilly, Benoit. *STATUS: Passed – Resolution #261* 

<u>\$2858</u>, Senate Resolution REQUESTING THE 106TH CONGRESS OF THE UNITED STATES OF AMERICA TO PASS S. 707 ENTITLED, AN ACT TO AMEND THE OLDER AMERICANS ACT OF 1965 -- Sponsored by: Senators Gibbs and Roberts. *\$7ATUS: Passed – Resolution #179* 

<u>H8265</u>, House Resolution REQUESTING THE 106TH CONGRESS OF THE UNITED STATES OF AMERICA TO PASS S. 707 ENTITLED, AN ACT TO AMEND THE OLDER AMERICANS ACT OF 1965 -- Sponsored by: Reps. Ginaitt, Reilly, Benoit. *STATUS: Passed – Resolution #262* 

**S2897**, Senate Resolution MEMORIALIZING CONGRESS TO TAKE MEASURES TO FURTHER REDUCE THE ADVERSE EFFECTS OF THE BALANCED BUDGET ACT OF 1997 -- Sponsored by: Senators Roberts, Gibbs, Izzo, Gallo, Fogarty P. **STATUS: Passed – Resolution #216** 

<u>H8263</u>, House Resolution MEMORIALIZING CONGRESS TO TAKE MEASURES TO FURTHER REDUCE THE ADVERSE EFFECTS OF THE BALANCED BUDGET ACT OF 1997 -- Sponsored by: Reps. Ginaitt, Reilly, Benoit. *STATUS: Passed – Resolution #260* 

#### II. ADVOCACY

<u>State Budget for FY 2001</u>. The Council's Work Plan for 2000 included several funding items relating to long-term care. (See Section 2). The Executive Director testified in support of these funding recommendations before both the House and Senate Finance Subcommittees on Human Services as they considered both the DHS and the DEA FY2001 budget proposals.

<u>Federal Watch.</u> As part of its advocacy efforts, the Council monitors federal activity relating to long-term care and aging services including Medicare. This past year the Council continued to advocate to change some of the provisions of the 1997 federal Balanced Budget Act (BBA) that were devastating the state's health care industry and severely impacting many long term care providers (See Resolutions #260 and #216 in Legislation section). In addition, the Council continued to support a new Medicare drug benefit (See Resolutions # 261 and #178 in Legislation section).

The Council also worked closely with members of the state's Congressional delegation to support reauthorization of the Older Americans Act (OAA) and to pass the new National Family Caregiver Support Program-NFCSP (See Resolutions #179 and #262.) Congress did reauthorize the OAA in 2000 (signed by the President on November 13<sup>th</sup> and included an appropriation in the FY2001 budget to implement the provisions of the NFCSP. The Rhode Island DEA is scheduled to receive \$564,300 in new funds under this program.

In 2000, the Council invited Mr. George Jacobs, the regional Director of the Health Care Financing Administration, to present at two of its meetings to share important information relating to federal initiatives. In April, Mr. George Jacobs met with the Council's Medicare Subcommittee to provide relevant information on the new home care reimbursement program and in November he gave an overview of the "Report to Congress – Appropriateness of Minimum Staffing Ratios in Nursing Homes".

**Diversity Training.** On May 16<sup>th</sup>, a Diversity Awareness Training session was held for Council members at the Village at Hillsgrove. The Department of Elderly Affairs organized and sponsored the program with the assistance of the RI National Guard. Its purpose was to increase the awareness of Council members to issues of diversity in the long-term care service system thus enhancing advocacy efforts to identify and meet the needs of ethnic/minority elders.

#### III. PUBLIC INFORMATION AND EDUCATION

<u>Web Site.</u> The Council continued to maintain its home page accessed through Lt. Gov. Fogarty's web site found at: www.ltgov.state.ri.us.

<u>Newsletter.</u> In January and July, the Council published editions of its newsletter, *Rhode Island Long Term Care Briefs*, reporting on legislative actions and program activity dealing with long-term care and other related matters. The newsletter is distributed to about 2500 individuals and/or agencies.

Long-Term Care Insurance Seminar. In November the Council held a long-term care insurance seminar at Highland

Court. A panel of experts discussed the growing demand for long-term care and provided information to help consumers make informed decisions regarding the purchase of long-term care insurance.

**Presentations.** In July Lt. Gov. Fogarty and Executive Director Maigret made presentations on long-term care at Cranston's Senior Summit 2000.

**RIPAE Educational Program.** Lt. Gov. Fogarty worked closely with the state DEA and members of the legislature to inform older consumers of the new RIPAE provisions passed into law in 2000. A Consumer News Bulletin regarding RIPAE was distributed to all members of the legislature and educational sessions were held at eight senior centers across the state from August through November.

#### IV. PLANNING, RESEARCH AND POLICY DEVELOPMENT

2000 Work Plan. See Section 2

Work Group on Residential Care and Assisted Living. Following a review of proposed national standards developed by CARF and JCAHO, The Work Group prepared legislation to expand the definition of assisted living to include health care services, change the name to assisted living residence, add requirement for initial evaluation and service plans and further strengthen residents' rights. The legislation was approved by the full council and enacted into law by the general assembly.

<u>Long Term Care Budget.</u> In January, the Council published the 3rd edition of **Rhode Island Long Term Care Spending:**Where Do the \$\$\$\$ Go? This report provides data on state long-term care expenditures across four departments of state government. The report also includes data on service and program utilization collated on a cross-departmental basis. This provides policy makers with valuable information in both the spending and service categories needed to make sound decisions.

"Shared Vision"/"Living Rite" Project. As an outgrowth to long-term care planning legislation supported by the Council in 1997 (P.L. 97-194 and P.L. 97-359), in 1998 a report prepared collaboratively by the Departments of Elderly Affairs,

Health, Human Services and Mental Health Retardation and Hospitals titled "Toward a Shared Vision; Creating a Seamless Long-Term Care System for Rhode Island" was issued. Subsequently, the Department of Human Services brought together provider groups, consumers, advocates and state agency staff to build further consensus for reform. This process referred to as "the Shared Vision project" led to the development of a plan called "Living Rite" which would create community-based centers for enhanced information/referral services and care coordination. Council members Rick Ryan and Ann Gardella serve as two of the three Living Rite implementation leaders. As appropriate, the Council coordinates its activities with the project.

Quality Measurement and Reporting. The Council continued to keep informed about the implementation of the "Fogarty Law" requiring HEALTH to implement a quality performance measurement and reporting law. In May, Mr. William Waters provided an overview of Health's implementation activities to the Council. In early 2001, a subcommittee will be formed, including several Council members, to develop the parameters for measuring and reporting on quality in nursing homes.

<u>Nursing Home Abuse Complaint Reporting.</u> In response to concerns raised by Council members, an ad hoc group was formed to review and make recommendations regarding the format used by HEALTH in compiling these reports. As a result, a new format was prepared to be instituted in 2001.

<u>CNA Study Group.</u> At the direction of the Chairman, in October a study Group on CNAs was formed to address the CNA crises and to develop both short and long-term solutions to the problem. The Study Group will continue its work in 2001.

### Section 3.

Based on a series of meetings held in the fall of 1999, the Council adopted an official Work Plan for 2000 at its January 2000 meeting. A status report on this Work Plan follows.

#### LTCCC WORK PLAN 2000 - STATUS REPORT

#### Area 1. Information - Referral - Screening

• Action 1.1.

Support Expansion of DEA Elder Information Specialist Network to add nine workers, two specifically for minority agencies

-- Funding Needed - \$250,000; Funds Available in Governor's Budget - 0

#### STATUS: 1) \$85,000 in additional funding secured in FY2001 budget

- 2) Small increase in OAA Title IIIB funds
- 3) Five (5) additional workers added for total of 18

#### Action 1.2.

Support DEA I+R Website (with information on long term care and senior/disabled services)

- -- Funding Needed \$40,000; Funding Available \$10,000 federal grant
- -- Funding Available in Governor's Budget \$0

#### STATUS: Website developed by OIP for \$5,000

#### Action 1.3.

Support Specialized Caregiver Information Services for alzheimer's caregivers and caregivers of

multicultural and lingual elders

- -- Funding Needed \$25,000 for caregiver support groups;
- -- Funding Available in Governor's Budget \$0

STATUS: 1) Federal OAA Alzheimer's multi-year grant awarded to DEA with \$\$ for Alzheimer's Association, 2) Medicaid FFP being secured for caregiver support services by adult day care centers at \$60/hr, 3) State grant of \$50,000 to Alzheimer's Association for caregiver support, 4) National Family Caregiver initiative enacted with reauthorization of OAA. RI to receive \$560,000.

#### Area 2. Transportation

#### · Action 2.1.

Support creation of paratransit services for visitor program

-- Funding Needed - \$75,000; Funding Available in Governor's Budget - \$0

#### STATUS: \$0 funding provided

- Action 2.2
  - Support Adequate paratransit services for medical trips
    - -- Funding Needed \$0 two-week booking time is being maintained presently

#### STATUS: Two-week booking time maintained

#### **Area 3. Mental Health Intervention Services**

#### Action 3.1.

Support programming to meet unmet service needs of community living elders and disabled

- -- Funding Needed; \$800,000
- -- Funding Available: \$0

#### STATUS: \$0 funding obtained

#### Action 3.2.

Support recommendations of DEA Guardianship Committee to establish a pilot volunteer guardianship program

-- Funding Needed: \$85,000; Funding in Governor's Budget - \$0

# STATUS: \$85,000 secured in FY2001 budget and DEA issued RFP and awarded grant to Meals on Wheels in January 2001

#### **Area 4. Cultural Diversity Initiatives**

#### • Action 4.1.

Support Creation of DEA Elder Rights and Diversity Center

- -- Funding Needed: \$50,000
- -- Funding Available in Governor's Budget \$0

STATUS: Position funded in budget and Center targeted for 1/1/2001 implementation

#### · Action 4.2.

Collaborate with DEA to provide Diversity Training for LTCCC

and LTC Leadership

-- Funding Needed: \$3,000; Funding Available

STATUS: – Seminar on Diversity conducted on May 16<sup>th</sup> at Village at Hillsgrove – Sponsored for LTCCC by DEA and presented by DEOMI (Defense Equal Opportunity Management Institute)

#### Area 5. Long Term Care Financing

- Action 5.1
  - . Prepare LTC Budget Report for FY2000 -

#### STATUS: Prepared and issued in January 2000

#### · Action 5.2.

Recommend legislation to increase Medicaid eligibility to

120% of poverty Introduced by Sen. Roberts and Rep. Benoit

-- Funding needed: \$1,200,000; Funding Available: incorporated in DHS budget

STATUS: Legislation passed (P.L. 104 & 165 and Article included in FY2001 budget bill to provide for Categorically Needy Medicaid eligibility to 100% of FPL for elders and disabled.

#### Action 5.3.

Support full funding for co-pay program to avoid waiting lists

-- Funding needed: \$0 - No waiting list at present

#### STATUS: No waiting list

#### Action 5.4.

Recommend further state funding to increase access to

residential care and assisted living for low income persons -

- -- Funding Needed: \$1,500,000 (for six months)
- -- Funding Available: \$0

STATUS: Resolutions passed (R#157 & #312 requesting DHS to apply to HCFA to expand assisted living waiver by 180 slots

#### Action 5.5.

Study feasibility of offering selected HCB waiver services as state plan services

STATUS: No action to date

#### • Action 5.6.

Promote development of "housing with services" model/s to

allow persons to remain in home and community environments

# STATUS: RI Housing Resources Commission to do "needs assessment"

#### Action 5.7.

Continue to promote long term care insurance by creation of

LTCCC Work Group on LTC Insurance -- Work Group Chair, Sheila Sousa

#### STATUS:

- 1) Work Group has not been formed
- 2) Long Term Care Insurance Informational Brochure under development by LTCCC
- 3) Informational Seminar on LTC Insurance held on 11/15

#### · Action 5.8.

Continue to advocate for federal reform to increase Medicare

funding for long term care services through Medicare Subcommittee

STATUS: Legislative Resolutions passed to urge Congress to 1) enact "Family Caregiver act as part of Older Americans Act – this was signed into law by President in October -- and 2) restore further funding lost as result of Balanced Budget Act of 1997 (Resolutions # 179, 262, 260 and 216)

#### Action 5.9.

Continue to advocate for financial assistance to pay for prescription medications through expansion

of RIPAE program

-- Support Lt. Gov.'s legislative initiatives to expand RIPAE

STATUS: Legislation passed to create new RIPAE PLUS program for persons up to \$34,999 (single) and \$40,000 (couples) income level and to add anti-infectives and drugs to treat arthritis to list of RIPAE covered drugs (P.L. # 195, 253 and 143)

#### Area 6. Care Coordination and LTC Managed Care

#### Action 6.1.

Support efforts to create new models of LTC care coordination using best practices of managed care and explore using community-based agencies for care coordination and management

-- Collaborate efforts with Shared Vision "Living Right" Implementation Group

STATUS: 1) DHS creating a Disease Management program for targeted Medicaid clients, 2) Living RIte committees designing coordinated information, screening and care management program standards

#### • Action 6.2.

Strengthen DEA Case Management Network by addition of

professional nurses

- -- Funding Needed \$370,000
- -- Funding Available in Governor's Budget \$0

#### STATUS: \$0 new funding obtained

#### Action 6.3.

Continue to work toward uniform assessment and case

Management process and placement protocols through LTCCC Work Group activity

Work Group Chair, Barbara Rayner

STATUS: Interdepartmental Work Group reviewing existing case management program requirements

#### **Area 7. Long Term Care Information System**

- Action 7.1
  - . Support development of long term care information system

which will serve as an interdepartmental data warehouse for state long-term care programs

STATUS: Living RIte Committees designing information network

#### Action 7.2.

Collaborate with DOH to implement 1998 Health Care Quality Measurement and Reporting

Law as it relates to long term care facilities and services

STATUS: DOH organizing Nursing Home Quality Measurement Committee to begin design work to implement quality reporting for nursing homes

#### **Appendix I**

# Long Term Care Coordinating Council

## **Highlights of Accomplishments**

#### 1987 - 1999

1987	• P.L. 87-117 creates Long Term Care Coordinating Council
1988	<ul> <li>Standards established for Long Term Care Insurance</li> <li>Case Management system created</li> <li>Nursing Home Receivership Law</li> </ul>
1989	<ul> <li>SSI special benefit for residents of Sheltered Care</li> <li>Bed priority protection for nursing home residents admitted to hospitals</li> </ul>
1990	<ul> <li>Stronger standards for Sheltered Care Facilities</li> <li>Consumer protections added to Long Term Care Insurance law</li> <li>Facilitated formation of Rhode Island Association for Senior Housing Managers (RIASH)</li> </ul>
1991	<ul> <li>Criminal background checks for employees of Long Term Care Providers</li> <li>Exploitation added to abuse in Health Care Facilities Act</li> <li>Family Caregiver Training Program</li> </ul>
1992	<ul> <li>Broadened Residential Care/Assisted Living services</li> <li>Instigated new nursing home bed need study by Health Department</li> </ul>
1993	<ul> <li>Completed draft of comprehensive State Long Term Care Plan</li> <li>Successfully advocated to prevent closing of wards at Eleanor Slater Hospital</li> <li>Alzheimer's Special Care Unit Disclosure Law</li> </ul>
1994	<ul> <li>Published Long Term Care 1995-2000</li> <li>Task Force on Medications in Nursing Facilities</li> <li>Mandated Continuing Education for Administrators of Nursing and Residential Care/Assisted Living Facilities</li> </ul>
1995	<ul> <li>Milbank Memorial Fund Collaboration Project Begins</li> <li>State Long Term Care Ombudsman Statute</li> <li>Task Force on Licensing of Home Care Providers</li> </ul>
1996	<ul> <li>New Umbrella Law for Licensing Home Care Providers</li> <li>Advocated protection of federal Nursing Home Standards</li> </ul>
1997	<ul> <li>Promoted \$1.7 million increase in state budget for Long Term Care</li> <li>Provider/Physician Disclosure laws</li> <li>Facilitated "Choices Coalition" Long Term Care Planning Law</li> </ul>
1998	<ul> <li>Secured \$50,000 to develop home care ombudsman program</li> <li>Enacted home care "bill of rights" law</li> <li>Obtained \$300,000 to fund mental health services for at-risk older adults</li> <li>Increased payments for SSI enhanced residential care/assisted living services</li> <li>Requirement for certification of residential</li> </ul>

care/assisted living administrators

- Creation of family caregiver resource network and \$150,000 new funds for caregiver support and respite
- Added drugs for Alzheimer's Disease to RIPAE
- Set new goals and values for state long term care
- Designated DEA as central agency to coordinate community-based long- term care entry system
- Increased funds for home care and meals on wheels

1999

- Increased payment rates for Home Care Providers
- Increase Medicaid eligibility to 89% FPL
- Increased Personal Needs Allowance for Nursing Home residents bu \$10/month
- Added drugs to treat depression to RIPAE
- Required HEALTH be notified of pending labor action and approve facility response plan
- Required ten percent of nursing home surveys be done in non-standard hours and bi-monthly inspection of facilities with sub-standard care
- Strengthened rights of assisted living residents
- Required HEALTH to submit annual report on long-term care regulatory activities
- Secured additional funds for the following:

\$200,000\$ for home modifications for persons with disabilities

\$85,000 additional funds for ombudsman program

\$48,400 for Meals on Wheels

\$24,750 for respite care

#### **Appendix II**

STATUTE ESTABLISHING THE LONG TERM CARE COORDINATING COUNCIL

**CHAPTER** 23-17.3

§ 23-17.3-1 Establishment – Purposes – Reports to Council. – (a) There is hereby established the long-term care coordinating council. The purpose of the council shall be to develop and coordinate state policy concerning all forms of long-term health care for the elderly and adults with chronic disabilities and illnesses, ranging from at-home and community based care and respite care through intensive nursing care to long-term hospital care. The council shall examine and make recommendations concerning any and all issues relating to long-term health care for the elderly and adults with chronic disabilities and illnesses, including, but not limited to: standards and quality performance; personnel issues to include training standards, recruitment, and staffing needs; enforcement of regulations; patient/client rights; eligibility and access issues; and the adequacy of funding and delivery of long-term care services.

(b) The council is empowered to appoint subcommittees to study specialized areas of concern and to report their findings to the council.

- (c) The council is empowered to seek the advice and assistance of the American association of retired persons, Rhode Island chapter, members of state and local care organizations and associations.
- (d) The council is empowered to apply for and receive grants, appropriations, or gifts from any federal, state, or local agency, from any public or private foundation, or from any individual in order to carry out the purposes of this chapter.
- (e) All departments, boards, and agencies of the state shall cooperate with the council and furnish such advice and information, documentary and otherwise, as may be necessary or desirable to facilitate the purposes of this chapter.
- (f) The department of health shall provide a written report to the long-term care coordinating council by March 30 of each year regarding its regulatory activities for the preceding calendar year in the area of long-term care. The annual regulatory report shall include information on long-term care survey activities, including complaints of abuse and/or neglect, as requested by the chairperson of the council. In addition, the department of health shall also notify the chairperson of the council whenever a licensed long-term care facility or provider is cited for providing substandard care.
- § 23-17.3-2 Membership. [Effective January 1, 2001.]. The council shall be comprised of thirty-seven (37) members, as follows: the lieutenant governor or designee; the secretary of state or designee; the director of the department of health or designee; the director of the department of human services or designee; the director of the department of mental health, retardation, and hospitals or designee; the attorney general or designee; the director of the department of elderly affairs or designee; the chair of the Rhode Island Advisory Commission on Aging or designee; the president of the Rhode Island Chapter of the American Association of Retired Persons (AARP) or his or her designee; the director of the alliance for long-term care or designee; the president of the Rhode Island senior center directors association or designee; the executive director of the Rhode Island chapter of the Alzheimer's association or designee; a representative of a long-term care provider organization other than a nursing home owner, and a representative of a residential care/assisted living care facility other than a nursing home, to be appointed by the governor; a representative of a not-for-profit nursing home to be appointed by the lieutenant governor; five (5) citizens of the state with no direct or indirect interest in nursing home ownership who have demonstrated concern for the care of the elderly, two (2) of whom shall be appointed by the lieutenant governor, two (2) of whom shall be appointed by the speaker of the house of representatives, and one of whom shall be appointed by the majority leader of the senate; a representative of an adult day care center to be appointed by the speaker; a representative of senior housing to be appointed by the lieutenant governor; a representative of a not for profit home health care agency to be appointed by the speaker; a representative of a for profit home health care agency to be appointed by the speaker; and a representative of a community mental health center, to be appointed by the senate majority leader; a registered nurse experienced in the care of the elderly, to be appointed by the governor; a representative of non-managerial nursing home employees, to be appointed by the lieutenant governor; three (3) members of the house, not more than two (2) from the same political party, to be appointed by the speaker; a nursing home owner, to be appointed by the speaker; two (2) members of the senate, not more than one from the same political party to be appointed by the majority leader one consumer of home and community based care to be appointed by the speaker from a list of three (3) submitted by the chairperson of the independent living council; one consumer of home and community based care to be appointed by the senate majority leader from a list of three (3) submitted by the chairperson of the Governor's Council on Mental Health; a general physician to be appointed by the senate majority leader and a psychiatrist specializing in the medical problems of the elderly, to be appointed by the lieutenant governor. Members of the general public may be appointed in lieu of legislators, provided that at least one member shall be appointed from the house and one from the senate, and the appointments shall be made by the same authority as for the legislators supplanted. The members of the council shall serve two-year terms, expiring on the second anniversary of each individual's appointment or on the date that their respective successors are appointed and qualified, whichever is later.
- § 23-17.3-3 Organization Officers. Forthwith upon June 18, 1987, the members of the council shall meet at the call of the lieutenant governor and elect from among themselves a chair, a vice chair, and a secretary. The officers shall serve one-year terms and shall be eligible to succeed themselves.
- § 23-17.3-4 Public meetings. The council shall meet at least four (4) times annually. All meetings of the council shall be open to the public, and the public shall be duly notified of the date, time, and location of each meeting.
- § 23-17.3-5 Reports and recommendations. The council shall submit an annual report to the governor and the general assembly on or before January 15th of each year, setting forth the council's recommendations for the betterment of long-term health care for the elderly. In addition, the council shall make recommendations to the appropriate state agencies whenever it considers the recommendations to be necessary.

**Appendix III** 

In October of 1994, the Long Term Care Coordinating Council issued A Long Term Care Plan for Rhode Island 1995-2000: Working Together to Make the Pieces Fit. The Plan's principles and goals are list below.

#### **Principles**

- 1.
- To recognize that the need for long term care will continue to grow, and continue to be a major budget concern for the state.
- 2. To expand efforts that support the many Rhode Island families who shoulder the burden of providing care for a loved one.
- 3. To shape services to fit the consumers and their situations.
- 4. To redesign the way that long term care services are paid for, in such a way that promotes prevention, early screening, and care in the most appropriate and least costly ways.
- 5. To adopt a uniform set of questions to be used by a network of qualified and objective 'screeners/case managers' who will work with families to determine their needs and the best possible options for care.
- 6. To continually improve the quality of care provided, taking into account consumer satisfaction, and seeking high standards for state oversight.
- And, in every way, to attempt to help people in need by clearing away unnecessary hurdles to receiving care in the most appropriate and timely fashion.

#### Goals

1. Life with maximal independence and dignity for all older Rhode Islanders who have limitations as a result of chronic

conditions and for younger adults who have similar limitations and who utilize the same service system and supports.

- 2. A flexible, responsive and affordable state long term care service network.
- 3. A high quality long term care service system that can demonstrate cost effective results.